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**DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN
APPLICATION DATA SHEET (37 CFR 1.76)**

Title of Invention	ACCESS TOOL TO FACILITATE EXCHANGE OF DATA TO AND FROM AN END-USER APPLICATION SOFTWARE PACKAGE
<p>As the below named inventor(s), I/we declare that:</p> <p>This declaration is directed to:</p> <p><input checked="" type="checkbox"/> The attached application, or</p> <p><input type="checkbox"/> Application No. _____, filed on _____</p> <p><input type="checkbox"/> as amended on _____ (if applicable);</p> <p>I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;</p> <p>I/we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;</p> <p>I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.</p> <p>All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.</p>	

FULL NAME OF INVENTOR(S)	
Inventor one: <u>Jeffrey Scott Turner</u>	
Signature: <u>[Signature]</u>	Citizen of: <u>United States of America</u>
Inventor two: <u>Lafayette Thompson</u>	
Signature: <u>[Signature]</u>	Citizen of: <u>United States of America</u>
Inventor three: <u>Tommy Ray Willard</u>	
Signature: <u>[Signature]</u>	Citizen of: <u>United States of America</u>
Inventor four: _____	
Signature: _____	Citizen of: _____
<input type="checkbox"/> Additional inventors or a legal representative are being named on _____ additional form(s) attached hereto.	

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1 minute to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	Unassigned
Filing Date	Herewith
First Named Inventor	Turner et al.
Title	ACCESS TOOL TO FACILITATE
Art Unit	Unassigned
Examiner Name	Unassigned
Attorney Docket Number	0956-003

I hereby appoint:

☒ Practitioners associated with the Customer Number:

26108

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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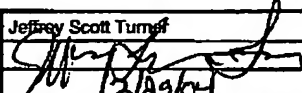
<input type="checkbox"/> Firm or Individual Name				
Address				
Address				
City		State		Zip
Country				
Telephone		Fax		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Jeffrey Scott Turner		
Signature			
Date	3/29/04	Telephone	919.846.7745

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of three forms are submitted.

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	Unassigned
Filing Date	Herewith
First Named Inventor	Tumer et al.
Title	ACCESS TOOL TO FACILITATE
Art Unit	Unassigned
Examiner Name	Unassigned
Attorney Docket Number	0956-003

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☐ Firm or Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Lafayette Thompson Jr.
Signature	<i>Lafayette Thompson Jr.</i>
Date	3-29-04
Telephone	919-469-1800

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	Unassigned
Filing Date	Herewith
First Named Inventor	Turner et al.
Title	ACCESS TOOL TO FACILITATE ...
Art Unit	Unassigned
Examiner Name	Unassigned
Attorney Docket Number	0958-003

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<input type="checkbox"/> Firm or Individual Name			
Address			
Address			
City	State	Zip	
Country			
Telephone	Fax		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Tommy Ray Willard		
Signature			
Date	03/29/2004	Telephone	919-387-1096

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